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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing      OR       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

<b>Attorney Docket Number</b>	
First Named Inventor <b>Kazuo Sakuma</b>	
<b>COMPLETE IF KNOWN</b>	
Application Number	/
Filing Date	
Art Unit	
Examiner Name	

**As the below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

*Preventive and therapeutic agents for microbe-related syndromes including HIV*

*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)   

as United States Application Number or PCT International

Application Number    and was amended on (MM/DD/YYYY)    (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to:  Customer Number  
or Bar Code Label  OR  Correspondence address below

Name *Kazuo Sakuma*

Address *2119-1, Kaminayoro, Shimokawa-chou,*

City *Kamikawa-gun* State *Hokkaidou* ZIP *098-1216*

Country *Japan* Telephone *01654-3-1599* Fax *01654-3-7100*

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR :**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	<i>Kazuo</i>	Family Name or Surname	<i>Sakuma</i>
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Inventor's Signature	<i>Kazuo Sakuma</i>	Date	<i>February 1, 2002</i>
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Residence: City	<i>Kamikawa-gun</i>	State	<i>Hokkaidou</i>	Country	<i>Japan</i>	Citizenship	<i>Japan</i>
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Mailing Address	<i>2119-1, kaminayoro, Shimokawa-chou,</i>					
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City	<i>Kamikawa-gun</i>	State	<i>Hokkaidou</i>	ZIP	<i>098-1216</i>	Country	<i>Japan</i>
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**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
---	---------------------------

Inventor's Signature	Date
-------------------------	------

Residence: City	State	Country	Citizenship
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Mailing Address
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City	State	ZIP	Country
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Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

## 國際送金為替金等受領証

Remittance receipt

年月日 处理番号 取扱局番号 处理時分 種目摘要

14-01-28 N074 98015

15:23:1

28 JAN. 2002

記号 番号

89822

2378

取扱内容

国際通常為替

送 金 額

USD\*\*\*\*\*433.00

換 算 割 合

USD1=¥135.60

払 达 金 額

\*58,714 円

国名

アメリカ合衆国

用紙番号

513582

料 金  
\*1,000 円合計金額  
\*59,714 円

000200000587148982200002378

郵便番号

受取人 郵便振替口座番号(受取人が口座をお持ちの場合) Payee Giro account number if the payee has one

氏名 Name The Commissioner of Payments and Trade  
demands U.S. DEPARTMENT OF COMMERCE住所 Address Washington D.C. 20231 USA

郵便番号 Postal code

名あて国 Country U.S.A差出人 Remitter 氏名 Name Kazuya Sakuma

Please note

住所 Address 2119-1 Kamimayoro Shimokawa-choKamikawa-gun Hakkaido電話番号 Telephone number 098-1216 Japan

098-1216 Japan

通信文 Message if any within the space provided.

※必要な場合のみ御記入(付はけられ) Message if any within the space provided.

※名あて国及び取扱いにより、ローマ文字及びアラビア数字により30文字又は5語以内とさせていただくことがあります。

The message may be limited to 30 characters / 5 words or less in roman characters and the arabian numerals depending on the destination country.

送金目的 Purpose

特許料

通貨コード Currency code (ISO standard)

金額 Amount

USD

433.00 / 100

取扱指定 Purpose

※名あて国により制限があります。

※該当の□に"√"をご記入ください。

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> 証書交付 Sent by remitter | <input type="checkbox"/> 郵便局留置 Post office retention         |
| <input type="checkbox"/> 電信 Telegraph                     | <input type="checkbox"/> 手渡済通知/登記済通知 Advice of payment/entry |
| <input type="checkbox"/> 遅達 Express delivery              |  |